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<b>Application Number</b>	10/663,385
<b>Filing Date</b>	09/16/2003
<b>First Named Inventor</b>	William J. Sequerra
<b>Title</b>	SYSTEM AND METHOD FOR DISTRIBUTION AND ...
<b>Art Unit</b>	2178
<b>Examiner Name</b>	K. Stork
<b>Attorney Docket Number</b>	Americast-029

I hereby revoke all previous powers of attorney given in the above-identified application.

☐ A Power of Attorney is submitted herewith.

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☒ I hereby appoint Practitioner(s) associated with the following Customer Number as my/our attorney(s) or agent(s) to prosecute the application identified above, and to transact all business in the United States Patent and Trademark Office connected therewith:

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☒ Assignee of record of the entire interest. See 37 CFR 3.71.☒ Statement under 37 CFR 3.73(b) (Form PTO/SB/96) submitted herewith or filed on \_\_\_\_\_**SIGNATURE of Applicant or Assignee of Record**

Signature

Date

Name

Peter Tracy

Telephone

Title and Company

CEO

**NOTE** Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.☒ \*Total of 1 of 1 forms are submitted.

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